This Product Contains Sensitive Taxpayer Data

Wage and Income Transcript

Request Date: 02-23-2023
Response Date: 02-23-2023
Tracking Number: 103911470878

SSN Provided: 10-7074

Tax Period Requested: December, 2019

Form W-2 Wage and Tax Statement

Employer:

Employer Identification Number (EIN): 831569982
WELL DUNN CONSTRUCTION CORP
8 VESCHI LANE N
MAHOPAC, NY 10541-0000

Employee:

Submission Type:	Original document
Wages, Tips and Other Compensation:	\$5,000.00
Federal Income Tax Withheld:	\$621.00
Social Security Wages:	\$5,000.00
Social Security Tax Withheld:	\$310.00
Medicare Wages and Tips:	\$5,000.00
Medicare Tax Withheld:	\$72.00
Social Security Tips:	\$0.00
Allocated Tips:	\$0.00
Dependent Care Benefits:	\$0.00
Deferred Compensation:	\$0.00
Code "Q" Nontaxable Combat Pay:	\$0.00
Code "W" Employer Contributions to a Health Savings Account:	\$0.00
Code "Y" Deferrals under a section 409A nonqualified Deferred Compensation plan:	\$0.00
Code "Z" Income under section 409A on a nonqualified Deferred Compensation plan:	\$0.00
Code "R" Employer's Contribution to MSA:	\$0.00
Code "S" Employer's Contribution to Simple Account:	\$0.00
Code "T" Expenses Incurred for Qualified Adoptions:	\$0.00
Code "V" Income from exercise of non-statutory stock options:	\$0.00
Code "AA" Designated Roth Contributions under a Section 401(k) Plan:	\$0.00
Code "BB" Designated Roth Contributions under a Section 403(b) Plan:	\$0.00
Code "DD" Cost of Employer-Sponsored Health Coverage:	\$0.00

Code "EE" Designated ROTH Contributions Under a Governmental Section 457(b) Plan:	\$0.00
Code "FF" Permitted benefits under a qualified small employer health reimbursement arrangement:	\$0.00
Code "GG" Income from Qualified Equity Grants Under Section 83(i):	\$0.00
Code "HH" Aggregate Deferrals Under Section 83(i) Elections as of the Close of the Calendar Year:	\$0.00
Third Party Sick Pay Indicator:	Unanswered
Retirement Plan Indicator:	Unanswered
Statutory Employee:	Not Statutory Employee
W2 Submission Type:	Original
W2 WHC SSN Validation Code:	Correct SSN

Form 5498 Individual Retirement Arrangement Contribution Information

Trustee:

Trustee/Issuer's Federal Identification Number (FIN): 043107527 FIDELITY INVESTMENTS

TA> FIDELITY INVEST INST OPS CO

100 SALEM ST MZ 02S

SMITHFIELD, RI 02917-1234

Participant:

Participant's Identification Number: 7074
SEAN M DUNN
PO BOX 1161

YORKTOWN HTS, NY 10598-8161

Submission Type:	Original document
Account Number (Optional):	AAFR0130701482322136
IRA Contributions:	\$0.00
Rollover Contributions:	\$0.00
Roth Conversion Amount:	\$0.00
Recharacterized Contributions:	\$0.00
Fair Market Value of Account:	\$178.00
Life Insurance Cost Included in Box 1:	\$0.00
SEP Code:	Not Checked
IRA Code:	Not Checked
Simple Code:	Checked
Roth IRA Code:	Not Checked
RMD For Subsequent Year:	RMD box not checked
RMD Date:	00-00-000
Year:	
Postponed Contribution Code:	
Repayments Code:	
Fair Market Value of certain specified assets:	N/A
SEP Contributions:	\$0.00
SIMPLE Contributions:	\$0.00
Roth IRA Contributions:	\$0.00
Required Minimum Distribution Amount:	\$0.00
Postponed Contributions:	\$0.00

\$0.00

Form 5498 Individual Retirement Arrangement Contribution Information

Trustee:

Trustee/Issuer's Federal Identification Number (FIN): 436402078 AMERICAN CENTURY SERVICES TEFRA AGENT PO BOX 419385 KANSAS CITY, MO 64141-6385

Participant:

Participant's Identification Number: -7074 SEAN DUNN

8 VESCHI LN N

MAHOPAC, NY 10541-3207

Submission Type:	Original document
Account Number (Optional):	945462122647074AA
IRA Contributions:	\$0.00
Rollover Contributions:	\$0.00
Roth Conversion Amount:	\$0.00
Recharacterized Contributions:	\$0.00
Fair Market Value of Account:	\$3,279.00
Life Insurance Cost Included in Box 1:	\$0.00
SEP Code:	Not Checked
IRA Code:	Not Checked
Simple Code:	Checked
Roth IRA Code:	Not Checked
RMD For Subsequent Year:	RMD box not checked
RMD Date:	00-00-0000
Year:	
Postponed Contribution Code:	
Repayments Code:	
Fair Market Value of certain specified assets:	N/A
SEP Contributions:	\$0.00
SIMPLE Contributions:	\$3,150.00
Roth IRA Contributions:	\$0.00
Required Minimum Distribution Amount:	\$0.00
Postponed Contributions:	\$0.00
Repayment of a qualified reservist distribution or federally designated disaster withdrawal repayment:	\$0.00
Fair Market Value of Certain Specified Assets:	\$0.00

Form 1099-DIV

Payer:

Payer's Federal Identification Number (FIN): 043523567

NATIONAL FINANCIAL SERVICES LLC 499 WASHINGTON BLVD JERSEY CITY, NJ 07310-0000

Recipient:

Recipient's Identification Number: 2074

SEAN DUNN

PO BOX 1161

YORKTOWN HTS, NY 10598-8161

Submission Type:	Original document
Account Number (Optional):	DX22442410
Tax Withheld:	\$0.00
Capital Gains:	\$0.00
Non-Dividend Distribution:	\$0.00
Cash Liquidation Distribution:	\$0.00
Non-Cash Liquidation Distribution:	\$0.00
Investment Expense:	\$0.00
Ordinary Dividend:	\$15.00
Collectibles (28%) Gain:	\$0.00
Unrecaptured Section 1250 Gain:	\$0.00
Section 1202 Gain:	\$0.00
Foreign Tax Paid:	\$0.00
Qualified Dividends:	\$15.00
Section 199A REIT Dividends:	\$0.00
Second Notice Indicator:	No Second Notice
FATCA Filing Requirement:	Box not checked no Filing Requirement
Exempt Interest Dividends:	\$0.00
Specified Private Activity Bond Interest Dividend:	\$0.00

Form 1099-INT

Payer:

Payer's Federal Identification Number (FIN): 043523567 NATIONAL FINANCIAL SERVICES LLC 499 WASHINGTON BLVD JERSEY CITY, NJ 07310-0000

Recipient:

Recipient's Identification Number: 4074
SEAN DUNN

PO BOX 1161

YORKTOWN HTS, NY 10598-8161

Submission Type:		Original document
Account Number (Optional):		IX22442410
Interest:		\$0.00
Tax Withheld:	У.	\$0.00
Savings Bonds:		\$0.00
Investment Expense:		\$0.00
Interest Forfeiture:		\$0.00
Foreign Tax Paid:		\$0.00
Tax-Exempt Interest:		\$0.00

Specified Private Activity Bond Interest:	\$0.00
Market Discount:	\$0.00
Bond Premium:	\$0.00
Bond Premium on Tax Exempt Bond:	\$0.00
Bond Premium on Treasury Obligations:	\$0.00
Second Notice Indicator:	No Second Notice
Foreign Country or US Possession:	
CUSIP Number:	315994103
FATCA Filing Requirement:	Box not checked no Filing Requirement

Form 1099-MISC

Payer:

Payer's Federal Identification Number (FIN): 474307210

LAK 3 LLC

1943 BEEKMAN CT

YORKTOWN HEIGHTS, NY 10598-0000

Recipient:

Recipient's Identification Number: 7074

SEAN M DUNN

DBA WELL DUNN

8 VESCHI LN N

MAHOPAC, NY 10541-0000

Submission Type:	Original document
Account Number (Optional):	
Tax Withheld:	\$0.00
Non-Employee Compensation:	\$322,868.00
Medical Payments:	\$0.00
Fishing Income:	\$0.00
Rents:	\$0.00
Royalties:	\$0.00
Other Income:	\$0.00
Substitute Payments for Dividends:	\$0.00
Excess Golden Parachute:	\$0.00
Crop Insurance:	\$0.00
Attorney Fees:	\$0.00
Foreign Tax Paid:	\$0.00
Section 409A Deferrals:	\$0.00
Section 409A Income:	\$0.00
Direct Sales Indicator:	Not Direct Sales
FATCA Filing Requirement:	Box not checked no Filing Requirement
Second Notice Indicator:	No Second Notice

This Product Contains Sensitive Taxpayer Data